Deaths

There were 24,632 resident deaths recorded for Kansans in 2005, an increase of 3.8 percent from the 2004 total of 23.720. (Table 32)

Comanche, Republic and Woodson counties had the highest five-year (2001-2005) county death rates of 17.6, 17.3, and 17.3 deaths per 1,000 population respectively. Finney, Riley, and Douglas counties had the lowest five-year death rates of 5.0, 5.0, and 5.4 deaths per 1,000 population respectively. (Table 32, Figure 27)

Belleville, Eureka, and Herington had the highest five-year city death rates (2001-2005) of 26.5, 22.8, and 19.6 respectively. Olathe, Lawrence, and Manhattan experienced the lowest five-year city death rates of 4.7, 4.9, and 5.2 respectively. (Table 33)

The Kansas death rate in 2005 was 9.0 deaths per 1,000 population, which was 9.8 percent higher than the estimated U.S. rate of 8.2 deaths per 1,000 population. (Figure 28)

Of all stillbirths in 2005, 87.1 percent were attributed to conditions originating in the perinatal period and 10.3 percent to congenital anomalies. (Table 34)

Examining the components that constitute perinatal period III mortality, the numbers of stillbirths and hebdomadal deaths declined 46.7 percent and 50.6 percent respectively from 1976 to 2005. Caution should be used in interpreting these decreases due to the relatively small number of occurrences. In 2005, there were 347 perinatal period III deaths, representing a death rate of 8.7 deaths per 1,000 live births plus stillbirths. This rate has decreased 54.0 percent from the 1976 rate of 18.9. (Tables 35 and 36, Figure 29)

A total of 297 infant deaths occurred to Kansas residents in 2005. The overall infant death rate for 2005 was 7.5 infant deaths per 1,000 live births. For comparison, the 2005 rate (7.5) represents a decrease of 46.0 percent from the rate of 13.9 in 1976. The white infant death rate was 6.3 deaths per 1,000 live births in 2005, a decrease of 50.8 percent from the rate of 12.8 in 1976. The black infant death rate in 2005 was 17.3, a decrease of 42.3 percent from the rate of 30.0 in 1976. (Figure 30, Tables 37 and 38)

During the five-year period, 2001-2005, the infant death rate for Kansas was 7.2. Lane county had the highest infant death rate (22.7) during this time period. Of those counties reporting infant deaths, Rice county had the lowest rate (1.6). Eighteen counties had no infant deaths. (Table 38)

Of all infant deaths in 2005, 44.1 percent were attributed to conditions originating in the perinatal period, 22.9 percent were attributed to congenital anomalies, 14.8 percent to sudden infant death syndrome and 18.2 percent to all other causes. (Table 39)

For each year from 1982 to 2004 there were five or fewer maternal deaths among Kansas residents. In 2005, there were six maternal deaths to Kansas residents, a rate of 1.5 per 10,000 live births. (Figure 32)

The Kansas age-adjusted death rate (see Technical Notes pgs. 144-145) per 1,000 standard U.S. 2000 population was consistently below that of the U.S. from 1996-2004. (Table 42, Figure 33)

The state's 2005 age-adjusted death rate for males (9.5) was 37.7 percent higher than the rate of 6.9 for females. (Table 42)

The average age at death of Kansas residents in 2005 was 74.2 years, a 2.6 percent increase from the average age at death of 72.3 years in 1986. (Table 43)

The average age at death for the white population in 2005 was 75.2 years, nearly eleven years older than that of the black population, whose average age at death was 64.5 years. The average age at death for Hispanics was 55.6. (Table 44)

The two leading causes of death in Kansas in 2005, heart disease and malignant neoplasms, had average ages at death of 78.9 and 71.5 years respectively. Alzheimer's, with an average age at death of 86.9 years, had the highest average age at death of any of the leading causes of death. (Table 47)

The average age at death for male unintentional injury victims for 1996 and 2005 was 45.6 and 48.3 respectively, while for females the average age was 60.0 and 58.7 years respectively. For this time period, the average age at death decreased for female unintentional injury victims 2.2 percent while for male unintentional injury victims it increased 5.9 percent. (Table 47)

The cause-specific death rate for Alzheimer's Disease in Kansas was 33.2 deaths per 100,000 population in 2005. The rate for females (47.4) was more than twice as high as the rate for males (18.8). (Table 47)

The cancer death rate for 2005 was 197.4 deaths per 100,000 population, 4.7 percent lower than the rate of 207.1 in 1996. (Tables 47 and 48)

In 2005, the unintentional injury death rate was 42.8 deaths per 100,000 population, 5.2 percent higher than the rate of 40.7 in 1996. (Tables 47 and 48)

The age-adjusted death rate for the leading cause of death, heart disease, was 188.5, and for cancer, the second leading cause of death, the age-adjusted death rate was 185.1 per 100,000 standard U.S. 2000 population. Together, these two causes accounted for almost fifty (46.1) percent of all Kansas resident deaths. (Table 48)

Heart disease reached a high of 393.4 deaths per 100,000 population in 1973 and gradually declined to 216.3 deaths per 100,000 population in 2005. Conversely, cancer rates steadily increased from 157.2 to 207.1 deaths per 100,000 population from 1966 to 1996, but have generally declined since 1996, to 197.4 in 2005. (Figure 34)

In 2005, Kansans died from cerebrovascular disease at slightly less than half the rate of forty years ago, with the death rates for this disease going from 120.2 in 1966 to 57.0 in 2005. The death rate for unintentional injury also declined, going from 62.6 in 1966 to 42.8 in 2005, a 31.6 percent decrease. (Figure 34)

In 2005, unintentional injuries were the leading cause of death for Kansas residents 1-44 years of age. (Figure 35)

For Kansas children 1-4 years of age, deaths in 2005 were due mainly to unintentional injuries and congenital anomalies followed by homicides. (Figure 35)

For the age-group 15-24, unintentional injuries were followed by suicides and homicides as leading causes of death. Together, they accounted for 76 (76.3) percent of these deaths. (Figure 35)

In 2005, cancer of the respiratory and intrathoracic organs, digestive organs and breast were the leading causes of cancer deaths in women. (Table 50)

The dominant occupations for deaths due to suicides and homicides were operators, fabricators and laborers. (Table 54)

Mortality in Kansas was responsible for 200,849 years of potential life lost in 2005 (See Technical Notes pg. 145). Cancer was the second leading cause of death in Kansas, but accounted for the most years of potential life lost (44,650 years). Unintentional injuries represented nearly two times the years of potential life lost among men (20,437 years) compared to women (10,584 years). (Table 56, Figure 36)